	/HE	ffective	December 8, 2	NINATION RI 2004	ECORD	101	nan	Or K
TEXPEC	/Ar CLAIN	MS AS F	ILED - PART			10/	080	19)
TOTAL CLAIMS		-071	(Column 1)	(Column 2)	SMAI TYPE	LL ENTITY		OTHER T
FOR RCE FES					RAT	E FE		MALL EN
TOTAL CHARGEABLE CLAIMS			NUMBER FILED NUMBER EXTR		A BASIC	-		SIC FEE
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*If the diffe	erence in column	1 is less ti	han zero, enter "(	O" in column a	+180	=	OR +3	60=
	CLAIMS A	SAMFA	IDED - PART	· .	TOTA		OR TO	TAL 79
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4    -	CLAIMS REMAININ AFTER		HIGHES NUMBER	00505115		L ENTITY	OR SMA	ALL ENTI
Total Independ	AMENDME	NT	PREVIOUS PAID FOR	LY	RATE	ADDI- TIONAL	RAT	AD TIOI
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	(Column 1)		(Column 2)	(Column 3)	ADDIT. FEE	OF	ADDIT FEE	
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ndependent		Minus	***	=	X\$ 25=	OR	∵X\$50=	
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IRST PRESI			· · · · · · · · · · · · · · · · ·		+180=	OR OR	+360=	-